

DECLARATION AND POWER OF ATTORNEY

ATTORNEY'S DOCKET NO.
1435

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name; and I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled A method and arrangement for controlling a tuneable laser, the specification of which

(check) ☐ is attached hereto. June 21, 2000 as
(one) ☒ was filed on

Application Serial No. PCT/SE00/01320

and was amended on _____ (if applicable)

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations, §1.56(a), and Title 35 USC §102, as printed on the reverse of this Declaration and which I have read.

I hereby claim foreign priority benefits under Title 35, United States Code, §119 of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed:

Prior Foreign Application(s)			Priority Claimed
<u>9902604-9</u>	<u>Sweden</u>	<u>6 July 1999</u>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
(Number)	(Country)	(Day/Month/Year Filed)	
_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No
(Number)	(Country)	(Day/Month/Year Filed)	

POWER OF ATTORNEY: As a named inventor, I hereby appoint

Alfred J. Mangels, Registration No. 22,605, my attorney with

full power of substitution and revocation to prosecute this application, to receive correspondence from and transact all business in the Patent Office connected therewith. The correspondence address of the above attorney is:

SEND CORRESPONDENCE TO: Alfred J. Mangels
4729 Cornell Road
Cincinnati, Ohio 45241-2433

DIRECT TELEPHONE CALLS TO:
(513) 469-0470

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full name of sole or first inventor Björn Broberg
Inventor's signature Björn Broberg Date Jan 21, 2002
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Full name of second joint inventor, if any Markus Renlund
Inventor's signature Markus Renlund Date Jan 29, 2002
Residence Boston, USA
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Full name of third joint inventor, if any _____
Inventor's signature _____ Date _____
Residence _____
Citizenship _____
Post Office Address _____